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APPLICANTS

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/20/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MN	DRAWING 7	32	2
Verified and Acknowledged	<i>Geoffrey TN</i> Examiner's Signature Initials				

ADDRESS

Imation Corp.
 PO Box 64898
 St. Paul , MA
 55164-0898

TITLE

Method of manufacturing a media reference surface for use in a flexible data storage card

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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